



Inspection Report on

Springbank Care Home

**Springbank Nursing Home
College Road
Barry
CF62 8HS**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

13 January 2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Springbank Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Springbank Care Home Limited
Registered places	62
Language of the service	English and Welsh
Previous Care Inspectorate Wales inspection	03 June 2019
Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

Springbank Care Home provides personal care to people, some of whom have nursing needs. The provider has appointed a responsible individual (RI). They oversee the quality of care provision. A suitably registered manager oversees the day-to-day running of the service, setting excellent examples to staff through a hands-on-approach, whilst maintaining administrative duties. All staff are supported by the organisation and feel happy in their work.

People receive kind and considerate care from trained and qualified care staff. Health needs are met. Medication administration is safe. Food provision is good. People are happy and enjoy taking part in activities of their choice. Improvements are required around recording activities. Care plans are reviewed, but people's representatives are not always consulted as part of this process. People and their families tell us that the service is very good and staff are cheerful and lovely.

The building is fit for purpose and suitable equipment is in place to support care needs. The environment is safe, warm and bright. Visiting is managed with measures in place to keep everyone safe, due to the current pandemic.

This inspection takes place 22 months after the start of the Covid-19 pandemic, when the government has restrictions in place due to the most recent variant of the virus.

Well-being

Overall people living at Springbank are happy with the service they receive, with comments such as *"It's a home from home"*, and *"nothing could be done better."* People have information to support choices and are encouraged to make decisions on a day-to-day basis. When people lack capacity, referrals are made to ensure they have representatives appointed, but they are not always invited to attend reviews of care plans. People are listened to, and where possible, wishes accommodated.

The service keeps people safe. Risk assessments are in place to inform actions required to keep people safe. Care staff and nurses have relevant training, supervision and support so they are aware of risks and how to minimise them. Infection prevention and control measures are followed. The environment is monitored and maintained to a good standard. People are informed and consulted. The building is secure with parts being monitored using CCTV as outlined in the statement of purpose. Measures are taken to protect people from infection. While some families feel these are too stringent, some people in the service told us *"the protection from Covid is marvellous."*

The home offers suitable accommodation in pleasant grounds. The environment is clean, tidy and nicely presented. However, some corridors can be congested at times when medication administration and mealtimes coincide. People can choose to go to communal areas, but many like to carry out their independent activities in their own bedrooms. Sufficient specialist equipment supports people with their health and mobility needs. People are cared for by a happy and motivated staff team.

Overall, families spoke highly of the staff team and care provision, with one person commenting *"they look after X, no doubt about it!"* The service ensures that assessments are carried out prior to a person moving into the home, so that it is clear if needs can be met. Documentation supports staff to provide the care needed. Daily records are good, focusing on people's health care needs. Social interaction with care staff is not always captured in documentation. People get the right care and referrals are made to external services where necessary, and in a timely manner. The manager audits records to inform care provision, anticipating resources required and communicates this to the whole staff team. People enjoy a good diet and maintain a healthy weight.

Care and Support

Detailed assessments are completed to ensure information is captured about a person before they are admitted to the home. The service records things that are important to people, such as interests they may have. Care plans are developed in a timely manner from the information gathered. These are detailed, and instruct care staff how to support a person. Relevant risk assessments are in place. Referrals are made to appropriate professionals or agencies. The majority of people told us they received care in accordance with their care plan.

We observed sensitive care being delivered by competent care workers and nurses. Early intervention ensures people's health is maintained as far as possible. People using the service said "*staff take their time when helping me with personal care*" and "*they are ever so good.*" Several people described the staff as "*happy and cheerful,*" but people also said "*they don't have time to stop and chat*". An activity coordinator is employed, sometimes supported by other staff to arrange events and provide one to one activities. Daily records do not reflect the levels of social interaction received on a daily basis from care staff. Health professionals are involved in line with care plans. Routine health checks such as weights, are recorded and monitored. Good nutrition and hydration records are maintained and people commented that "*the food is good*".

Care plan reviews are carried out and information is updated to ensure care is provided appropriately. Family members can also contribute. When people lack capacity, though they can make day-to-day decisions, representatives are not always involved in care plan reviews. Reviews lack evidence of who has been involved, when, what actions need to be taken and by whom. While no immediate action is required, this is an area for improvement and we expect the provider to take action. This will be followed up at the next inspection.

Medication administration is in line with procedures and has improved since the last inspection. An electronic system is now used. On the day of inspection, we found one medicine stored that had passed its expiry date. The manager addressed this immediately, ensuring nurses improved their observation of these details. We expect the service to sustain this improvement. We also expect the service to sustain improved practices around the recording of the temperatures of the medication room and fridge

Environment

The service provider ensures that the premises and equipment is suitable and meets regulatory requirements. Equipment and premises are regularly maintained and tested when necessary to ensure everyone's safety. Risk assessments are in place. Routine fire drills and fire alarm tests take place. Kitchen and food handling meets environmental health requirements. Audits are carried out but these do not always identify small details that could improve the environment. We saw a lock missing on one room, tiles loose behind one sink and the medication environment lacked consistent monitoring of temperature. The manager took immediate action to address these issues. The provider has identified areas where the environment could be improved, with plans to refurbish and refresh parts of the building, including the garden space. The home is generally tidy, warm, bright and well presented. Garden space is available with seating. One person told us that the provider is hoping to develop part of the garden to accommodate an allotment, to support those residents interested in this. The building is secure, and monitoring systems are in place to help protect people.

A building called a "pod" has been installed in the garden to support families to visit during the current pandemic. Infection control measures are taken to protect people during the pandemic, including provision of protective equipment throughout the building. Additional cleaning regimes have been put in place and the amount of people going into the building has been considered, and when necessary, limited. Risk assessments support the decision making around this. While some families told us they feel frustrated by the limited visiting options, the majority of families and people told us that they appreciated the measures taken to keep them safe.

Leadership and Management

The service provider has a nominated responsible individual (RI) in place who is carrying out their duties with due diligence. They visit the service and consult with people and families to inform the ongoing development of the service. During the pandemic, meetings with families has not been possible, but alternative consultation methods have been used. The RI provides reports as required under the regulations. A named manager has responsibility for the day-day running of the service. The manager and wider staff team comment positively on the support they receive from the provider, through the RI. Policies, procedures are available and kept under review. Documents to inform people about the service including a '*statement of purpose*' and '*service user guide*' are available and reviewed regularly.

Systems are in place to support the day-to-day running of the service, overseen by the manager. The manager is very organised, knowledgeable and respected. They undertake the administrative role of manager, but also maintain an understanding of people's care needs as they regularly cover provision of nursing care to support their knowledge. During the pandemic, regular meetings within various staff teams have not been undertaken, but the manager provides a daily brief to all department heads. When conditions allow, we expect meetings to be more inclusive of the whole staff with opportunities to discuss matters in depth.

There are sufficient staff, of suitable experience and qualification. Care workers have appropriate induction and training. The provider encourages staff development and supports learning through incentives that staff appreciate. Recruitment is undertaken safely, and all necessary documentation is maintained on personnel files. All staff, including care staff, have regular supervision meetings and annual appraisals. Nurses have clinical supervision and maintain their clinical understanding to support their registration as a nurse. All staff consulted told us they are happy working at the home and feel supported in their role.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
16	People are not always consulted, or have appropriate	New

	representation when care plans are reviewed.	
21	Activities and interaction to support individuals with their emotional and mental well-being are not always documented.	New

Date Published 24/02/2022